CONSUMER LOAN APPLICATION

| Credit Requested Is: | Home Equity Loan | | Collateral | Secure | d Loan Perso | onal Unsecured Loa | an | | Account Reques | sted: | Indi | vidual | Joint |
|--|---|--|---|---|--|--|---|---|---|---|----------------------------------|--------------------------------------|---|
| Amount Requested | Description of Coll | lateral Offer | ed | | | | | | W | e intend to | apply fo | r joint cre | edit |
| Purpose of Credit Request | | | | | | | | Applicant | | | | Co-Applicant | |
| If the Applicant is married, he or c) you are relying on prope | or she may apply for | individual c | redit. For | Marita | I Status, check one it | a) you are applying trequested. | ng for a s | ecured credi | t; b) you reside i | n a commu | nity prop | erty stat | e; |
| | | icant | | | PPLICANT II | | ON | | Co-Applic | ant | | | |
| Applicant Role: | Borrower | Co-Sig | ner | Gua | ırantor | Applicant Role: | | | | Co-Signer | | Guarar | ntor |
| Applicant Name (include Jr. o | or Sr. if applicable) | | | | | Co-Applicant Na | ıme (inclu | ıde Jr. or Sr. | if applicable) | _ | | | |
| Social Security Number | Home Phor | ne (incl. area | a code) | DOB | (mm-dd-yyyy) | Social Security I | Number | | Home Phone (| incl. area co | ode) | DOB (m | nm-dd-yyyy) |
| Email Address | | | | | | Email Address | | | | | | | |
| ☐ Married ☐ Separated ☐ Unm | arried (include le, divorced, widowed | ' | 1 | not liste ages | ed by Co-Applicant) | ☐ Married☐ Separated | | Unmarried (ir single, divord | nclude ced, widowed) | Depen no. | 1 | ot listed b ages | by Applicant) |
| Citizenship: U.S. Ci | tizen Permane | ent Resident | Alien | L N | on-Resident Alien | Citizenship: U.S. Citizen Permanent Resident Alien Non-Resident Alien | | | | | | | |
| Present Address (street, city, | state, ZIP) | since | | | | Present Address (street, city, state, ZIP) since | | | | | | | |
| Mailing Address, if different f | rom Present Address | | | | | Mailing Address | | | sent Address | | | | |
| Former Address (street, city, | stato ZID) | from | f residing | at pres to | ent address for less th | Former Address | | | D) f | rom | | to | |
| Tomer Address (Street, City, | state, Zii) | nom | | 10 | | Tomer Address | (Street, t | orty, state, zi | ', ' | 10111 | | 10 | |
| | Appl | icant | EMF | LO, | MENT / INC | OME INFO | RMA | TION (| Co-Applica | ant | | | |
| Name & Address of Employer | | Self | Employed | i | Yrs. on this job | Name & Address | s of Emp | loyer | | Self | Employe | ed | Yrs. on this job |
| | | | | | Full time | | | | | | | • | Full time |
| Position/Title & Type of Busines | s | | Busines | s Phone | e (incl. area code) | Position/Title & | Type of I | Business | | | Busine | ss Phone | e (incl. area code) |
| Gross Monthly Income | \$ | | | | | Gross Monthly I | ncome | \$ | | | | ı | |
| Name & Address of Employer | | Self | Employed | i | Dates | Name & Address | s of Emp | loyer | | Self | Employe | ed | Dates |
| | | | | | from | | | | | | | | from to |
| Position/Title & Type of Busines | s | | Busines | s Phone | e (incl. area code) | Position/Title & | Type of I | Business | | | Busine | ess Phone | e (incl. area code) |
| Name & Address of Employer Self Employed Dates Name & Address of Employer Self Employed Dates | | | | | Dates | | | | | | | | |
| | | | | | from | | | | | | | | from |
| Position/Title & Type of Busines | • | | Pusings | o Dhon | to (incl. area anda) | Docition/Title 9 | Tuno of I | Puninana | | | Pusing | oo Bhono | to (incl. area code) |
| Position/Title & Type of Busines | S | | busines | s Priorie | e (incl. area code) | Position/Title & | Type of t | susiness | | | busine | ess Phone | e (incl. area code) |
| NOTICE: Alimony, Child Support | rt or Separate Mainter | nance Incom | e need no | t be re | vealed if you do not v | vish to have it con | sidered a | as a basis for | repaying this of | oligation. | | | |
| Other Income | | | | \$ | | Other Income | | | | | | \$ | |
| Other Income | | | | \$ | | Other Income | | | | | | \$ | |
| Other Income | | | | \$ | | Other Income | | | | | | \$ | |
| Other micorne | | | | | HOUSING IN | |)N | | | | | ļΨ | |
| Own Rent since | | | | | Monthly Housing/F | | ···· | resent Value | | | Date F | Purchase | d |
| | | | | Ç/ | ASH ASSET | INFORMAT | | | | | | | |
| Financial Institution Name | | | | | | | S \$ | aving Accou | nt Balance | | Check | king Acco | ount Balance |
| I/We hereby apply for the loan complete, and that I/we did not with other parties and to make as to Lender's experiences or tr. These representations and author to provide to any such insurer of | omit any important i any investigation of n ansactions with my/o orizations extend not | information. ny/our credi our account. only to Lend | I/We agr it, either d I/We und der, but al | ee that irectly lerstand so to a | t any property securing through any agence of that Lender will retain the loan insurer of the loan | ng the loan or creaty employed by Le ain this application and to any inves | dit will no nder for and any tor to wh | ot be used for that purpose, other credit nom Lender n | or any illegal or i . Lender may di information Ler nay sell all or ar | restricted pu sclose to ar nder receive | urpose. ny other s, even i | Lender is intereste if no loan | authorized to ver d parties informati or credit is grante |
| v | | | | | | v | | | | | | | |
| X Applicant | | | | | Date | X Co-Applica | nf | | | | | Date | |

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant: Application Number:

| Checking and Savings Accounts Nome & Address of Corepany Nome & Address of Corepany Pagment Ballocon Acct. No. \$ Acct | As | ssets | Liabilities | | | | | | |
|---|--|--------------------------|--|----------------|---------|--|--|--|--|
| Name & Address of Institution | Checking and Savings Accounts | | Name and Address of Creditor | | | | | | |
| Acct. No. \$ Acct. No. \$ Acct. No. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | Cash or Market Value | | Payment | Balance | | | | |
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| Other Assets Owned: Description Cash or Market Value | | | | 1 | | | | | |
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| | | C. J. and Mandrey Volume | 1 | | | | | | |
| | - | | 1 | | | | | | |
| | | | Acet No | T e | 6 | | | | |
| \$ Acct. No. \$ \$ Alimony/Child Support/Separate Maintenance Owed to \$ | | | | | \$ | | | | |
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| \$ Job Related Expense \$ | | | Joh Delated Evenese | • | | | | | |
| S Job Related Expense S | | | Job Related Expense | \$ | | | | | |
| LIQUID ASSETS \$ TOTAL MONTHLY PAYMENTS \$ | | | TOTAL MONTHLY PAYMENTS | ¢ | | | | | |
| TOTAL ASSETS \$ TOTAL LIABILITIES \$ | | | | | | | | | |
| NET WORTH \$ | | | | Ψ | | | | | |

[&]quot;*" indicates obligations satisfied at or before loan closing.

| INTERVIEWER INFORMATION | | | | |
|--|-------------------------------------|--------------|------|--|
| Originator Name | | Phone Number | Ext. | |
| Originator NMLSR Identifier | Originator License State and Number | | | |
| Company Name | L | | | |
| Company NMLSR Identifier | Company License State and Number | | | |
| Company Address (street, city, state, ZIP) | | | | |

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INSURANCE DISCLOSURE FOR CREDIT APPLICATION

| Applicant: | Lender: | Peoples Bank & Trust Company 1203 Hillsboro Blvd Manchester, TN 37355 |
|------------|---------|---|
| | | |

IMPORTANT

DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY READ IT AND UNDERSTAND ITS CONTENT

Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

Credit Disclosures.

- 1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
- Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

Acknowledgment.

| BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE REA | AD, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE. |
|---|--|
| APPLICANT: | |
| | |
| | |
| X | - |
| Applicant | Date |

INSURANCE DISCLOSURE FOR CREDIT APPLICATION (Continued)

Page 2

| BY SIGNING BELOW I ACKNOWLEDGE ON BEHALF OF THE APPLICANT AND THAT APPLICANT ACKNOWLEDGED REC | ELENDER THAT AN ORAL DISCLOSURE OF INSURANCE WAS DULY MADE TO THE CEIPT OF THE DISCLOSURE. |
|---|--|
| LENDER: | |
| PEOPLES BANK & TRUST COMPANY | |
| X Authorized Signer | Date |
| Title: | |

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